

EXHIBIT 1

B10 (Official Form 10) (04/13) (Modified)

UNITED STATES BANKRUPTCY COURT		Eastern District of Michigan	CHAPTER 9 PROOF OF CLAIM
Name of Debtor: City of Detroit, Michigan		Case Number: 13-53846	FILED FEB 27 2014 US Bankruptcy Court MI Eastern District
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.			
Name of Creditor (the person or other entity to whom the debtor owes money or property): Kim Spicer			
Name and address where notices should be sent: Kim Spicer 29357 SAKRAHWOOD ROSEVILLE MI 48066			<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Telephone number: 313 399-8312 email: SPICE30FUND@gmail.com			
Name and address where payment should be sent (if different from above):			<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars. RECEIVED FEB 24 2014 KURTZMAN CARSON CONSULTANTS
Telephone number: _____ email: _____			
1. Amount of Claim as of Date Case Filed: 204,272.75 If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input checked="" type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: Discrimination Based on Race and Retaliation (See instruction #2) Also Filed Through EEOC.			
3. Last four digits of any number by which creditor identifies debtor: 3846	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff; attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____	
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.			
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).		<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. § 507 (a)(4).	
<input type="checkbox"/> Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507 (a)(7).		<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5).	
<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8).		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)().	
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.			
6. Credits. The amount of all payments on this claim has been credited for the purpose of:			



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7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(e)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Ownership Statement is being filed with this claim. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

RECEIVED
FEB 24 2014

If the documents are not available, please explain:

8. Signature: (See instruction #8)

KURTZMAN CARSON CONSULTANTS

Check the appropriate box.

- ☐ I am the creditor. ☐ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. ☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
(See Bankruptcy Rule 3004.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name:

Title:

Company:

Address and telephone number (if different from notice address above):

(Signature)

(Date)

Telephone number:

email:

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the

claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

EXHIBIT 2

UNITED STATES BANKRUPTCY COURT Eastern District of Michigan		CHAPTER 9: PROOF OF CLAIM						
Name of Debtor: City of Detroit, Michigan	Case Number: 13-53846	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">7014 MAR 19 P 4: 18</div> <div style="font-size: 0.8em; margin-bottom: 10px;">U.S. BANKRUPTCY COURT E.D. MICHIGAN-DETROIT COURT USE ONLY</div> <div style="margin-top: 20px;"> <input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____ </div> <div style="margin-top: 20px;"> <input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars. <div style="font-size: 1.5em; font-weight: bold; margin-top: 5px;">RECEIVED</div> </div>						
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.								
Name of Creditor (the person or other entity to whom the debtor owes money or property): U.S. Equal Employment Opportunity Commission								
Name and address where notices should be sent: Dale Price, Trial Attorney 477 Michigan Avenue, Room 865 Detroit, Michigan 48226 Telephone number: (313) 226-7808 email: dale.price@eeoc.gov		Name and address where payment should be sent (if different from above): Kim Spioer 29357 Sandalwood Roseville, Michigan 48066 Telephone number: (313) 399-8312 email: Spice30fun@gmail.com						
1. Amount of Claim as of Date Case Filed: \$ 204,272.75 If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input checked="" type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.								
2. Basis for Claim: <u>Discrimination based on Race and Retaliation</u> (See instruction #2)								
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)						
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.								
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed) </td> <td style="width: 50%; vertical-align: top;"> Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____ </td> </tr> </table>			Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____				
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)	Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____							
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.								
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). </td> <td style="width: 33%; vertical-align: top;"> <input checked="" type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4). </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5). </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). </td> <td style="vertical-align: top;"> <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8). </td> <td style="vertical-align: top;"> <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(____). </td> </tr> </table>			<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input checked="" type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).	<input type="checkbox"/> Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(____).
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Amount entitled to priority: \$ 4,272.75								
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.								
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)								



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7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See Instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

RECEIVED

MAR 24 2014

8. Signature: (See Instruction #8)

Check the appropriate box.

- ☐ I am the creditor. ☒ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. ☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

KURTZMAN CARSON CONSULTANTS

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Dale Price
Title: Trial Attorney
Company: Equal Employment Opportunity Commission
Address and telephone number (if different from notice address above):

Dale Price
(Signature)

03/18/2014

(Date)

Telephone number: _____ email: _____

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

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Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

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3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the

claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credit:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

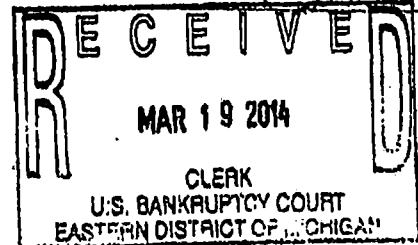
7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

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IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION



In re:

CITY OF DETROIT,

Debtor.

)
)
) Chapter 9
)
) Case No. 13-53846
)
) Hon. Steven W. Rhodes
)
) GOVERNMENTAL BAR DATE
) CLAIM

MEMORANDUM IN SUPPORT OF
EQUAL EMPLOYMENT OPPORTUNITY COMMISSION'S
CONSOLIDATED PROOF OF CLAIM

1. The undersigned United States Equal Employment Opportunity Commission ("Commission" or "EEOC") is the claimant herein. The EEOC's address is 477 Michigan Avenue, Room 865, Detroit, Michigan 48226. The Commission is the agency of the United States Government charged with the interpretation and enforcement of, as relevant here, Title VII of the Civil Rights Act of 1964 (Title VII), *as amended*, 42 U.S.C. § 2000e, *et seq.*; Title I of the Civil Rights Act of 1991 (Title I), 42 U.S.C. § 1981a, *et seq.*; and Title I of the Americans with Disabilities Act of 1990 (ADA), *as amended*, 42 U.S.C. § 12101, *et seq.*
2. The Commission's undersigned Trial Attorney is an employee authorized to file this Consolidated Proof of Claim and Memorandum in Support of EEOC's Consolidated Proof of Claim on behalf of the EEOC.
3. The Commission's Detroit Field Office is filing this Consolidated Proof

of Claim covering nine (9) Charges of employment discrimination, or sub-claims,
~~for which monetary relief is sought.~~

4. As specified on EEOC's Consolidated Proof of Claim, the Debtor, prior to the filing of the petition initiating this case became liable to this claimant for unsecured claims presently valued at \$1,374,635. In support of EEOC's Consolidated Proof of Claim, EEOC has attached a copy of each of the Charges of Employment Discrimination in Exhibit 1.

5. The proofs of claim are attached as Exhibit 2.

6. If, upon completion of EEOC's investigation, EEOC determines that there is reasonable cause to believe the charges are true, Debtor will become liable for backpay, compensatory damages, punitive damages and interest to remedy unlawful discrimination as set forth in the sub-claims detailed below:

Sub-Claim Re: Charge No. 471-2013-00912; Colleen Davenport

7. Charging Party alleges that on December 10, 2012, the City of Detroit discharged her from her employment because of her pregnancy in violation of Title VII and failed to pay this Charging Party wages or salaries.

8. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

9. This sub-claim consists of an unsecured claim of \$217,047.41 in back pay, compensatory and punitive damages accrued from December 10, 2012 through July 18, 2013.

10. No judgment has been rendered on this sub-claim.

11. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

12. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-03599; Jerry D. Patrick

13. Charging Party alleges that since December 6, 2012, the City of Detroit has discriminated against him in his employment because of his association with a person with disabilities in violation of the ADA and failed to pay him wages or salaries.

14. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

15. This sub-claim consists of an unsecured claim of \$101,867.00 in back pay, compensatory and punitive damages accrued from December 6, 2012 through July 18, 2013.

16. No judgment has been rendered on this sub-claim.

17. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

18. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-03183; Joseph Fletcher

19. Charging Party alleges that since April 2012, the City of Detroit has discriminated against him in his employment because of his race and his complaints about race discrimination in violation of Title VII and failed to pay him wages or salary.

20. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

21. This sub-claim consists of an unsecured claim of \$68,133.90 in back

pay, compensatory and punitive damages accrued from April 2012 through July 18, 2013.

- 22. No judgment has been rendered on this sub-claim.
- 23. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.
- 24. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-01577; Khadijah Ahmad

25. Charging Party alleges that since October 2010, the City of Detroit has discriminated against her in her employment because of her sex and her complaints about sexual harassment in violation of Title VII, including discharging her on January 16, 2013 and failed to pay her wages or salaries.

26. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

27. This sub-claim consists of an unsecured claim of \$220,062.67 in back pay, compensatory and punitive damages accrued from October 2010 through July 18, 2013.

- 28. No judgment has been rendered on this sub-claim.
- 29. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.
- 30. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-00823; Kim Spicer

31. Charging Party alleges that since August 22, 2012, the City of Detroit has discriminated against him in his employment because of his race and his

complaints about racial discrimination in violation of Title VII, and failed to pay
~~him wages or salaries.~~

32. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

33. This sub-claim consists of an unsecured claim of \$204,272.75 in back pay, compensatory and punitive damages accrued from August 22 through July 18, 2013.

34. No judgment has been rendered on this sub-claim.

35. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

36. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-02956; Major Russell

37. Charging Party alleges that since August 22, 2012, the City of Detroit has discriminated against him in his employment because of his race and his complaints about racial discrimination in violation of Title VII, and failed to pay him wages or salaries.

38. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

39. This sub-claim consists of an unsecured claim of \$100,000 in compensatory and punitive damages accrued from August 22 through July 18, 2013.

40. No judgment has been rendered on this sub-claim.

41. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

42. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2013-02967; Shannon Dekun

43. Charging Party alleges that since July 7, 2013, the City of Detroit has discriminated against her in her employment because of her sex in violation of Title VII, and failed to pay her damages.

44. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

45. This sub-claim consists of an unsecured claim of \$200,000 in compensatory and punitive damages accrued from July 7 through July 18, 2013.

46. No judgment has been rendered on this sub-claim.

47. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

48. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2014-00163; Sherell S. Stanley

49. Charging Party alleges that since October 24, 2012, the City of Detroit has discriminated against her in her employment because of her sex and because of her complaints about sexual discrimination in violation of Title VII, and failed to pay her wages or salaries.

50. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

51. This sub-claim consists of an unsecured claim of \$135,006.55 in backpay, compensatory and punitive damages accrued from October 24, 2012 through July 18, 2013.

52. No judgment has been rendered on this sub-claim.

53. The amount of all payments on this sub-claim has been credited and
~~deducted for the purpose of making this sub-claim.~~

54. This sub-claim is not subject to any setoff or counterclaim.

Sub-Claim Re: Charge No. 471-2014-00473; Tammy Barnes

55. Charging Party alleges that since November 2011, the City of Detroit has discriminated against her in her employment because of her sex in violation of Title VII, and failed to pay this Charging Party wages or salaries.

56. No Determination has been made regarding this Charge and the EEOC's investigation is continuing.

57. This sub-claim consists of an unsecured claim of \$128,244.80 in backpay, compensatory and punitive damages accrued from October 24, 2012 through July 18, 2013.

58. No judgment has been rendered on this sub-claim.

59. The amount of all payments on this sub-claim has been credited and deducted for the purpose of making this sub-claim.

60. This sub-claim is not subject to any setoff or counterclaim.

PENALTY FOR PRESENTING FRAUDULENT CLAIM. Fine of up to \$500,000 or imprisonment for not more than 5 years, or both. 18 U.S.C. Sections 152 and 3571.

Respectfully submitted,

~~EQUAL EMPLOYMENT OPPORTUNITY~~
COMMISSION

Dated: March 19, 2014

/s/ Dale Price 

Dale Price (P55578)

Trial Attorney

DETROIT FIELD OFFICE

477 Michigan Ave., Room 865

Detroit, Michigan 48226

(313) 226-7808

dale.price@eeoc.gov

EXHIBIT 3

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

-----X	
	:
In re	:
	:
	:
CITY OF DETROIT, MICHIGAN,	:
	:
	:
Debtor.	:
	:
	:
-----X	

	Chapter 9
	Case No. 13-53846
	Hon. Steven W. Rhodes

ADR NOTICE

Service Date: April 11, 2014

Designated Claimant(s): Kim Spicer

Address: 29357 Sandalwood, Roseville, MI 48066

Designated Claim Number(s): 3451

Amount(s) Stated in Proof(s) of Claim: \$204,272.75

**THIS ADR NOTICE IS BEING SENT BY, AND RESPONSES
SHOULD BE DIRECTED TO:**

Steven H. Schwartz (P41721)
Attorney for City of Detroit Water & Sewerage Department
Steven H. Schwartz & Associates, P.L.C.
31600 W. Thirteen Mile Road, Suite 125
Farmington Hills, MI 48334
(248) 626-7500

Deadline to Respond: May 9, 2014

By this ADR Notice, the City of Detroit (the "City") hereby submits the above-identified claim(s) (the "Designated Claim(s)") in the City's chapter 9 case to alternative dispute resolution, pursuant to the procedures (the "ADR Procedures") established by the Order, Pursuant to Sections 105 and 502 of the Bankruptcy Code, Approving Alternative Dispute Resolution Procedures to Promote the Liquidation of Certain Prepetition Claims (Docket No. 2302), entered by the United States Bankruptcy Court for the Eastern District of Michigan (the "Bankruptcy Court") on December 24, 2013. A copy of the ADR Procedures is enclosed for your reference.

The City has reviewed your Designated Claim(s) and, pursuant to the ADR Procedures, offers the amount(s) set forth below as a general unsecured nonpriority claim in full and final settlement of your Designated Claim(s) (the "Settlement Offer").

*You are required to return this ADR Notice with a Permitted Response (as defined below) to the Settlement Offer by no later than the **Deadline to Respond** indicated above.*

In addition, to the extent your most recent proof(s) of claim does not: (a) expressly identify each and every cause of action and legal theory on which you base your Designated Claim(s); (b) include current, correct and complete contact information of your counsel or other representative; or (c) provide all documents on which you rely in support of your Designated Claim(s), you hereby are requested to provide all such information and documentation with your Permitted Response.

IF YOU DO NOT RETURN THIS ADR NOTICE WITH THE REQUESTED INFORMATION AND A PERMITTED RESPONSE TO THE SETTLEMENT OFFER TO STEVEN H. SCHWARTZ SO THAT IT IS RECEIVED BY THE DEADLINE TO RESPOND, YOU WILL BE DEEMED TO HAVE REJECTED THE SETTLEMENT OFFER AND THE LIQUIDATION OF YOUR DESIGNATED CLAIMS WILL ADVANCE TO CASE EVALUATION AS SET FORTH IN SECTION II.B OF THE ADR PROCEDURES.

IN ADDITION, YOU ARE REQUIRED TO INDICATE EXPRESSLY WHETHER YOU CONSENT TO **BINDING ARBITRATION** IF YOUR DESIGNATED CLAIM CANNOT BE SETTLED THROUGH THE OFFER EXCHANGE PROCEDURES OR CASE EVALUATION. PLEASE COMPLETE THE APPROPRIATE BOX BELOW TO INDICATE WHETHER YOU DO OR DO NOT CONSENT TO **BINDING ARBITRATION**. *IF YOU DO NOT COMPLETE THE BOX BELOW, YOU WILL BE DEEMED TO HAVE REJECTED BINDING ARBITRATION WITH RESPECT TO YOUR DESIGNATED CLAIM.* PLEASE NOTE THAT YOUR CONSENT TO **BINDING ARBITRATION** CANNOT SUBSEQUENTLY BE WITHDRAWN.

In addition, any attempt to opt out of binding arbitration in the response to this Notice shall be ineffective if you previously have consented in writing (either prepetition or postpetition) to binding arbitration as a means to resolve your claim(s). Details about the arbitration process, including the sharing of fees, are set forth in Section II.C of the ADR Procedures.

Note that binding arbitration will only take place if **all parties** to a claim dispute – including the City – agree to submit the dispute to arbitration.

YOU MUST RESPOND TO THE FOLLOWING SETTLEMENT OFFER:

Settlement Offer: The City offers you an allowed general unsecured nonpriority claim in the amount of **[\$1.00]** against the City in full satisfaction of your Designated Claim(s), to be satisfied in accordance with any plan of adjustment of debts confirmed and implemented in the City's chapter 9 case.

The only permitted responses (the "Permitted Responses") to the Settlement Offer are (a) acceptance of the Settlement Offer or (b) rejection of the Settlement Offer coupled with a counteroffer (a "Counteroffer"). Accordingly, please select your Permitted Response below:

_____ I/we agree to and accept the terms of the Settlement Offer.

or

_____ I/we reject the Settlement Offer. However, I/we will accept an allowed general unsecured claim against the City in the amount of \$_____ in full satisfaction of the Designated Claim(s), to be satisfied in accordance with any plan of adjustment of debts confirmed and implemented in the City's chapter 9 case.

SECTION II.A.3 OF THE ADR PROCEDURES SETS FORTH THE RESTRICTIONS ON COUNTEROFFERS. YOUR COUNTEROFFER MAY NOT INCLUDE UNKNOWN, UNLIQUIDATED OR SIMILAR AMOUNTS AND MAY NOT EXCEED THE AMOUNT OR IMPROVE THE PRIORITY SET FORTH IN YOUR MOST RECENT TIMELY FILED OR AMENDED PROOF OF CLAIM. YOU MAY NOT AMEND YOUR PROOF OF CLAIM SOLELY FOR THE PURPOSE OF PROPOSING A COUNTEROFFER OF A HIGHER AMOUNT OR A BETTER PRIORITY. IF YOU RETURN THIS FORM WITH A COUNTEROFFER THAT DOES NOT COMPLY WITH THE TERMS OF THE ADR PROCEDURES YOU WILL BE DEEMED TO HAVE REJECTED THE SETTLEMENT OFFER AND THE LIQUIDATION OF YOUR DESIGNATED CLAIMS WILL ADVANCE TO CASE EVALUATION AS SET FORTH IN SECTION II.B OF THE ADR PROCEDURES.

Please indicate below whether you consent to binding arbitration with respect to the Designated Claim(s):

_____ **I/WE CONSENT TO BINDING ARBITRATION.**

_____ **I/WE DO NOT CONSENT TO BINDING ARBITRATION.**

I acknowledge that my/our consent to binding arbitration, once given, cannot be withdrawn.

Designated Claimant's Authorized Representative

Signature

By:

Print Name and Title

Date:

Additional signature if needed:

By:

Print Name and Title

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

In re

CITY OF DETROIT, MICHIGAN,

Debtor.

Chapter 9

Case No: 13-53846

Hon. Steven W. Rhodes

_____ /

PROOF OF SERVICE

The undersigned, being first duly sworn, deposes and says that s/he served a copy of (1) ADR Notice and (2) Proof of Service upon Kim Spicer, Claimant, via first class mail, by enclosing copies of the same in an envelope(s) clearly addressed to her at 29357 Sandalwood, Roseville, Michigan 48066, having fully prepaid postage thereon affixed and by depositing said envelope(s) in the United States Mail on April 11, 2014.



Tara Adams

DWSD/ADR/Spicer/POS

EXHIBIT 4

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

-----X		
In re	:	Chapter 9
	:	
CITY OF DETROIT, MICHIGAN,	:	Case No. 13-53846
	:	
Debtor.	:	Hon. Steven W. Rhodes
	:	
-----X		

ADR NOTICE

Service Date: June 10, 2014

Designated Claimant(s): Kim Spicer

Address: C/O Dale Price, Trial Attorney, 477 Michigan Avenue, Room 865,
Detroit, MI

Designated Claim Number(s): 3657

Amount(s) Stated in Proof(s) of Claim: \$204,272.75

**THIS ADR NOTICE IS BEING SENT BY, AND RESPONSES
SHOULD BE DIRECTED TO:**

Steven H. Schwartz (P41721)
Attorney for City of Detroit Water & Sewerage Department
Steven H. Schwartz & Associates, P.L.C.
31600 W. Thirteen Mile Road, Suite 125
Farmington Hills, MI 48334
(248) 626-7500

Deadline to Respond: July 8, 2014

By this ADR Notice, the City of Detroit (the "City") hereby submits the above-identified claim(s) (the "Designated Claim(s)") in the City's chapter 9 case to alternative dispute resolution, pursuant to the procedures (the "ADR Procedures") established by the Order, Pursuant to Sections 105 and 502 of the Bankruptcy Code, Approving Alternative Dispute Resolution Procedures to Promote the Liquidation of Certain Prepetition Claims (Docket No. 2302), entered by the United States Bankruptcy Court for the Eastern District of Michigan (the "Bankruptcy Court") on December 24, 2013. A copy of the ADR Procedures is enclosed for your reference.

The City has reviewed your Designated Claim(s) and, pursuant to the ADR Procedures, offers the amount(s) set forth below as a general unsecured nonpriority claim in full and final settlement of your Designated Claim(s) (the "Settlement Offer").

You are required to return this ADR Notice with a Permitted Response (as defined below) to the Settlement Offer by no later than the Deadline to Respond indicated above.

In addition, to the extent your most recent proof(s) of claim does not: (a) expressly identify each and every cause of action and legal theory on which you base your Designated Claim(s); (b) include current, correct and complete contact information of your counsel or other representative; or (c) provide all documents on which you rely in support of your Designated Claim(s), you hereby are requested to provide all such information and documentation with your Permitted Response.

IF YOU DO NOT RETURN THIS ADR NOTICE WITH THE REQUESTED INFORMATION AND A PERMITTED RESPONSE TO THE SETTLEMENT OFFER TO STEVEN H. SCHWARTZ SO THAT IT IS RECEIVED BY THE DEADLINE TO RESPOND, YOU WILL BE DEEMED TO HAVE REJECTED THE SETTLEMENT OFFER AND THE LIQUIDATION OF YOUR DESIGNATED CLAIMS WILL ADVANCE TO CASE EVALUATION AS SET FORTH IN SECTION II.B OF THE ADR PROCEDURES.

IN ADDITION, YOU ARE REQUIRED TO INDICATE EXPRESSLY WHETHER YOU CONSENT TO **BINDING ARBITRATION** IF YOUR DESIGNATED CLAIM CANNOT BE SETTLED THROUGH THE OFFER EXCHANGE PROCEDURES OR CASE EVALUATION. PLEASE COMPLETE THE APPROPRIATE BOX BELOW TO INDICATE WHETHER YOU DO OR DO NOT CONSENT TO **BINDING ARBITRATION**. *IF YOU DO NOT COMPLETE THE BOX BELOW, YOU WILL BE DEEMED TO HAVE REJECTED BINDING ARBITRATION WITH RESPECT TO YOUR DESIGNATED CLAIM.* PLEASE NOTE THAT YOUR CONSENT TO **BINDING ARBITRATION** CANNOT SUBSEQUENTLY BE WITHDRAWN.

In addition, any attempt to opt out of binding arbitration in the response to this Notice shall be ineffective if you previously have consented in writing (either prepetition or postpetition) to binding arbitration as a means to resolve your claim(s). Details about the arbitration process, including the sharing of fees, are set forth in Section II.C of the ADR Procedures.

Note that binding arbitration will only take place if *all parties* to a claim dispute – including the City – agree to submit the dispute to arbitration.

YOU MUST RESPOND TO THE FOLLOWING SETTLEMENT OFFER:

Settlement Offer: The City offers you an allowed general unsecured nonpriority claim in the amount of **[\$1.00]** against the City in full satisfaction of your Designated Claim(s), to be satisfied in accordance with any plan of adjustment of debts confirmed and implemented in the City's chapter 9 case.

The only permitted responses (the "Permitted Responses") to the Settlement Offer are (a) acceptance of the Settlement Offer or (b) rejection of the Settlement Offer coupled with a counteroffer (a "Counteroffer"). Accordingly, please select your Permitted Response below:

I/we agree to and accept the terms of the Settlement Offer.

or

 I/we reject the Settlement Offer. However, I/we will accept an allowed general unsecured claim against the City in the amount of \$ in full satisfaction of the Designated Claim(s), to be satisfied in accordance with any plan of adjustment of debts confirmed and implemented in the City's chapter 9 case.

SECTION II.A.3 OF THE ADR PROCEDURES SETS FORTH THE RESTRICTIONS ON COUNTEROFFERS. YOUR COUNTEROFFER MAY NOT INCLUDE UNKNOWN, UNLIQUIDATED OR SIMILAR AMOUNTS AND MAY NOT EXCEED THE AMOUNT OR IMPROVE THE PRIORITY SET FORTH IN YOUR MOST RECENT TIMELY FILED OR AMENDED PROOF OF CLAIM. YOU MAY NOT AMEND YOUR PROOF OF CLAIM SOLELY FOR THE PURPOSE OF PROPOSING A COUNTEROFFER OF A HIGHER AMOUNT OR A BETTER PRIORITY. IF YOU RETURN THIS FORM WITH A COUNTEROFFER THAT DOES NOT COMPLY WITH THE TERMS OF THE ADR PROCEDURES YOU WILL BE DEEMED TO HAVE REJECTED THE SETTLEMENT OFFER AND THE LIQUIDATION OF YOUR DESIGNATED CLAIMS WILL ADVANCE TO CASE EVALUATION AS SET FORTH IN SECTION II.B OF THE ADR PROCEDURES.

Please indicate below whether you consent to binding arbitration with respect to the Designated Claim(s):

_____ **I/WE CONSENT TO BINDING ARBITRATION.**

_____ **I/WE DO NOT CONSENT TO BINDING ARBITRATION.**

I acknowledge that my/our consent to binding arbitration, once given, cannot be withdrawn.

Designated Claimant's Authorized Representative

Signature

By:

Print Name and Title

Date:

Additional signature if needed:

By:

Print Name and Title

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

In re

CITY OF DETROIT, MICHIGAN,

Debtor.


Chapter 9

Case No: 13-53846

Hon. Steven W. Rhodes

PROOF OF SERVICE

The undersigned, being first duly sworn, deposes and says that s/he served a copy of (1) ADR Notice and (2) Proof of Service upon Kim Spicer, Claimant, via first class mail, C/O Dale Price, Trial Attorney, 477 Michigan Avenue, Room 865, Detroit, Michigan 48226 by enclosing copies of the same in an envelope(s) clearly addressed to him, having fully prepaid postage thereon affixed and by depositing said envelope(s) in the United States Mail on June 10, 2014.


Tara Adams

DWSD/ADR/Spicer/POS

EXHIBIT 5

October 28, 2014

UNITED STATES DISTRICT COURT

Hon. Steven Rhodes

RECEIVED OCT 30 2014

Notification of the Results of Case Evaluation

TITLE	CASE NUMBER
Spicer, Kim vs City of Detroit	13-538464

TO: ☐ Steven Schwartz
31600 W 13 Mile Rd Ste 125
Farmington Hills, MI 48334-2165
☐

ATTORNEY COPY

THIS CASE WILL PROCEED TO TRIAL AS THE COURT MAY DIRECT

AWARD RESULTS SUMMARY

Award Information			Parties Involved		Result
#	AMOUNT	STATUS	FOR	AGAINST	
1	\$100.00	Unanimous	2	vs. 1	Rejected

ATTORNEY / PARTY AWARD RESPONSES

Party Information		Attorney Information	
TYPE	# NAME	BAR # / NAME / PHONE #	

P 2 Spicer Kim

REJECTS (NO RESPONSE) AWARD #1

P55578 : Dale Price, Jr. : (313) 226-7808

D 1 City of Detroit Water and Sewerage | P41721 : Steven Schwartz : (248) 626-7500
ACCEPTS AWARD #1